



CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents P.O. Box 1450 Alexandria Virginia 22313-1450 on

<u>PATENT</u>

DOCKET NO.: 1240-24

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT:

David A. Krantz

SERIAL NO. :

10/808,347

FILING DATE:

March 25, 2004

FOR

SYSTEM AND METHOD FOR UTILIZING SHAPE ANALYSIS

TO ASSESS FETAL ABNORMALITY

GROUP NO. :

3768

EXAMINER:

Francis J. Jaworski

REVOCATION AND CHANGE OF POWER OF ATTORNEY **AND CHANGE OF ADDRESS**

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Applicant hereby revokes all previous powers of attorney and hereby appoints

KEVIN OLIVER, Registration No. 42,049;

PAM GUY, Registration No. 51,228;

NANCY WILKER, Registration No. 43,545, and DANIEL P. BURKE, Registration No. 30,735

to prosecute this patent with full power of substitution and revocation, and to transact all business in the Patent and Trademark Office connected therewith.

CHANGE OF ADDRESS

Please direct all future communications relating to this patent application to:

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By:

John L. Healy, Vice Presiden

ATD Laboratories, Inc.

Date: 10. Nov. 06

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